

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

BRIGHTPOINT ECLIPSE PAC

ADDRESS (number and street)

7635 INTERACTIVE WAY SUITE 200

☐Check if different  
than previously  
reported. (ACC)

INDIANAPOLIS

IN

46278

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00480301

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☒July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

04

01

2010

through

06

30

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. Steven E. Fivel

Signature of Treasurer

Electronically Filed by Mr. Steven E. Fivel

Date

09

10

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 13

Write or Type Committee Name  
BRIGHTPOINT ECLIPSE PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	<div><div>Y</div><div>Y</div><div>Y</div><div>2010</div></div>	<div>0.00</div>
(b) Cash on Hand at Beginning of Reporting Period .....	<div>0.00</div>	
(c) Total Receipts (from Line 19) .....	<div>36500.00</div>	<div>36500.00</div>
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<div>36500.00</div>	<div>36500.00</div>
7. Total Disbursements (from Line 31) .....	<div>33000.00</div>	<div>33000.00</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div>3500.00</div>	<div>3500.00</div>
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<div>0.00</div>	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<div>0.00</div>	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

BRIGHTPOINT ECLIPSE PAC

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	20000.00	20000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	20000.00	20000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	20000.00	20000.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	16500.00	16500.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	36500.00	36500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	36500.00	36500.00

## DETAILED SUMMARY PAGE

of Disbursements

4 / 13

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16500.00	16500.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	16500.00	16500.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	33000.00	33000.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33000.00	33000.00	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 13

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	20000.00	20000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20000.00	20000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BRIGHTPOINT ECLIPSE PAC**

**A.**

Full Name (Last, First, Middle Initial)

Mr. Anthony W. Boor

Mailing Address 5750 Stonechat Lane

City

Indianapolis

State

IN

Zip Code

46237

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Brightpoint

Occupation

Executive VP, CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.4100

Amount of Each Receipt this Period

1500.00

General

**B.**

Full Name (Last, First, Middle Initial)

Ms Ashley E. Davis

Mailing Address 4414 29th Street, NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blank Rome LLP

Occupation

Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.4102

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Vince Donargo

Mailing Address 12942 Treaty Line Street

City

Carmel

State

IN

Zip Code

46032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Brightpoint

Occupation

SVP, Chief Accounting Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.4104

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BRIGHTPOINT ECLIPSE PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 Mr. Thomas M. Dyer

Mailing Address 600 New Hampshire Avenue, NW

City State Zip Code  
 Washington DC 20037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Blank Rome LLP

Occupation  
 Co-Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.4106

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)  
 Mr. Steven E. Fivel

Mailing Address 7635 Interactive Way  
 Suite 200

City State Zip Code  
 Indianapolis IN 46278

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Brightpoint

Occupation  
 Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.4108

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)  
 Anurag Gupta

Mailing Address Edificio 6, 4a planta A  
 Cornella de Llobregat

City State Zip Code  
 Barcelona, Spain ZZ 08940

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Brightpoint

Occupation  
 Pres., Europe, Middle East & Africa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.4110

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 BRIGHTPOINT ECLIPSE PAC

A.

Full Name (Last, First, Middle Initial)  
 Mr. J. Mark Howell

Mailing Address 1982 Finchley Road

City State Zip Code  
 Carmel IN 46032

FEC ID number of contributing  
 federal political committee.

C

Name of Employer  
 Brightpoint

Occupation  
 President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.4112

Amount of Each Receipt this Period

1500.00

B.

Full Name (Last, First, Middle Initial)  
 Mr. Lacy M. Johnson

Mailing Address 4900 Buttonwood Crescent Drive

City State Zip Code  
 Indianapolis IN 46228

FEC ID number of contributing  
 federal political committee.

C

Name of Employer  
 Ice Miller LLP

Occupation  
 Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.4114

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)  
 Mr. Robert J. Laikin

Mailing Address 11509 Willow Ridge Drive

City State Zip Code  
 Zionsville IN 46077

FEC ID number of contributing  
 federal political committee.

C

Name of Employer  
 Brightpoint

Occupation  
 Chairman & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.4116

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional) .....

8000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 BRIGHTPOINT ECLIPSE PAC

**A.**

Full Name (Last, First, Middle Initial)  
 Mr. Robert J. Mittman

Mailing Address 405 Lexington Avenue  
 23rd Floor

City State Zip Code  
 New York NY 10174

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 Blank Rome LLP

Occupation  
 Chairman - New York

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.4118

Amount of Each Receipt this Period

3000.00

**B.**

Full Name (Last, First, Middle Initial)  
 Mr. Joel V. Perry

Mailing Address 6933 N. Delaware Street

City State Zip Code  
 Indianapolis IN 46220

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 Bright House Networks

Occupation  
 Account Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.4120

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

20000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 13

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)  
 BRIGHTPOINT ECLIPSE PAC

**A.**

Full Name (Last, First, Middle Initial)  
 Brightpoint

Mailing Address 7635 Interactive Way  
 Suite 200

City State Zip Code  
 Indianapolis IN 46278

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 4 / 2 9 / 2 0 1 0

Transaction ID: SA17.4122

Amount of Each Receipt this Period

14000.00

**B.**

Full Name (Last, First, Middle Initial)  
 Brightpoint

Mailing Address 7635 Interactive Way  
 Suite 200

City State Zip Code  
 Indianapolis IN 46278

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 1 4 / 2 0 1 0

Transaction ID: SA17.4123

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

16500.00

**TOTAL** This Period (last page this line number only) .....

16500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BRIGHTPOINT ECLIPSE PAC**A.** Full Name (Last, First, Middle Initial)  
Dan Burton for Congress Committee

Mailing Address P.O. Box 50593

City Indianapolis State IN Zip Code 46250

Purpose of Disbursement  
Political ContributionCandidate Name  
DANNY L. BURTONOffice Sought: ☒ House  
☐ Senate  
☐ President

State: IN District: 05

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4125

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	0

Amount of Each Disbursement this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
Ellsworth for Indiana

Mailing Address P.O. Box 62

City Evansville State IN Zip Code 47701

Purpose of Disbursement  
Political ContributionCandidate Name  
BRAD ELLSWORTHOffice Sought: ☐ House  
☒ Senate  
☐ President

State: IN District: 00

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.4127

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	1	0

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
Hershman for Congress

Mailing Address P.O. Box 412

City Monticello State IN Zip Code 47960

Purpose of Disbursement  
Political ContributionCandidate Name  
BRANDT E. HERSHMANOffice Sought: ☒ House  
☐ Senate  
☐ President

State: IN District: 04

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4129

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	0

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) .....

10500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BRIGHTPOINT ECLIPSE PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Hoosiers for Rokita</p> <p>Mailing Address 8103 East Hwy 36 Suite 203</p> <p>City Avon State IN Zip Code 46123</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name THEODORE EDWARD ROKITA</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IN District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4131</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>5000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	1	0	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	3		2	0	1	0													
5000.00																						
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Luke Messer for Congress</p> <p>Mailing Address P.O. Box 44390</p> <p>City Indianapolis State IN Zip Code 46204</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name ALLEN LUCAS MESSER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IN District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4133</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	1	0	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	3		2	0	1	0													
500.00																						
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mike Murphy for Congress</p> <p>Mailing Address 4239 Moss Ridge Lane</p> <p>City Indianapolis State IN Zip Code 46237</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name MICHAEL B MURPHY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IN District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4135</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td>500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	1	0	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	3		2	0	1	0													
500.00																						

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

16500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BRIGHTPOINT ECLIPSE PAC

A.

Full Name (Last, First, Middle Initial)

Brightpoint

Mailing Address 7635 Interactive Way  
Suite 200

City Indianapolis State IN Zip Code 46278

Purpose of Disbursement  
Refund of Contributions

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4136

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 1 7 / 2 0 1 0

Amount of Each Disbursement this Period

16500.00

SUBTOTAL of Disbursements This Page (optional) ►

16500.00

TOTAL This Period (last page this line number only) ►

16500.00